



LEROY D. BACA, SHERIFF

County of Los Angeles
Sheriff's Department Headquarters
4700 Ramona Boulevard
Monterey Park, California 91754-2169



September 1, 2004

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
Los Angeles, California 90012

Dear Supervisors:

RESPONSE TO ISSUES RELATED TO MRSA

The purpose of this document is to address specific issues relating to the report on Methicillin-Resistant *Staphylococcus Aureus* (MRSA) by the Department of Health Services, dated July 22, 2004. MRSA is a significant issue throughout the nation, having been discovered two years ago in the Los Angeles County Jails. Prior to being identified, it was originally thought that spider bites had been the cause of the sores that were being observed on inmates. Since its identification, the Sheriff's Department has been proactive in combating the problem, and is actively involved in addressing all issues related to MRSA. To that end, the Sheriff's Department convenes a monthly MRSA Task Force, and has been called upon to make several presentations during the April 2004 American Jail Association meeting regarding our progress in combating MRSA.

Combating MRSA

On June 9, 2003, the Los Angeles County Sheriff's Department submitted a review to your Board relative to the MRSA issue. This detailed report covered 20 issues addressed by the Department of Health Services for combating MRSA. The letter also covered corrective actions that were recommended to our Department in order to fully address MRSA. All of these recommendations have been implemented with applicable policies written to address the Department of Health Services' concerns. Among the corrective actions taken were the introduction of a hand sanitizing lotion for personnel, the creation of an informational video tape presentation that outlines the MRSA issue, the availability of daily showers for all inmates, as well as separate housing being made available at both Men's Central Jail (MCJ) and North County Correctional Facility

A Tradition of Service

(NCCF) for those inmates who have been identified as being infected with MRSA. Attached to this document is a table summarizing the current status of the 20 recommendations, which includes a complete accounting of all our corrective actions that have been taken to date.

In addition to the issues brought forth by the Department of Health Services, the Sheriff's Department has identified two additional corrective actions for addressing MRSA issues. Due to the additional funds recently supplied by the Board, the Sheriff's Department has implemented the Title 15 Compliance Officer Program. This program has the primary responsibility for ensuring that safety checks are conducted throughout the jail system on an hourly basis. During these checks, the Compliance Officers assist in ensuring compliance with other Title 15 requirements, including clothing exchange and distribution of hand soap to inmates.

An additional issue identified by the Sheriff's Department and addressed in our Board letter dated April 30, 2003, regarding MRSA, is the lack of an in-house Physician Epidemiologist and support staff. The Epidemiologist would be responsible for actively monitoring and treating inmates with MRSA. This in-house specialist would increase the Department's effectiveness in addressing the overall problem of MRSA. As such, we are requesting funding for (1) Physician Specialist Epidemiology, (3) Public Health Nurses, and (1) Operations Assistant, totaling \$519,004 in personnel costs and \$100,000 in supplies for a total of \$619,004.

As you are aware, the Sheriff's Department, in conjunction with the Department of Health Services, and the Center for Disease Control, conducted a study on 2 percent Chlorhexidine Liquid Anti-Bacterial Soap (LABS) during the months of March and April 2004. The results of this study were inconclusive, in that there was no reduction in the presence of MRSA during the study period. During this time, the number of inmates infected with MRSA actually increased. It should also be noted that the number of new inmates being booked into the system increased during this time period as well. The use of the LABS product has since been discontinued.

During the course of the two month LABS study, the Department of Health Services also conducted various Knowledge, Attitude, and Practice (KAP) surveys of inmates. It was reported by the Department of Health Services that inmates indicated two areas of concern regarding our ongoing efforts to combat MRSA. The first issue noted that there appeared to be a lack of readily available standard soap for inmate use. The second concern involved reports that clothing exchange was not being conducted twice per week, particularly with the female inmates housed at Twin Towers Correctional Facility (TTCF).

Corrective Action Taken:

Once it was learned that there was an issue regarding hand soap issuance at both MCJ and TTCF, both facilities immediately addressed this concern through briefings to line personnel, coupled with follow-up inspections by line supervisors. Personnel are continually trained regarding the importance of issuing hand soap to help combat MRSA. Additionally, MRSA Informational Bulletins and images depicting MRSA symptoms have been posted throughout the jails in an additional effort to ensure that personnel fully comply with the requirement to issue soap as required. Both facilities have a significant amount of hand soap readily available for inmates and both facilities report that they are in full compliance with policy. We will continue to monitor the availability of hand soap and ensure that personnel make it available to inmates.

Regarding the issue of laundry exchange, it was discovered that the Pitchess Detention Center Laundry began to supply a lesser amount of clothing to all custody facilities for a two-week period during the March and April 2004 survey, due to a shortage of qualified inmate workers. As a result, some facilities were not able to fully exchange all articles of clothing as required. The number of inmate workers had dwindled department-wide over the past several months, due to the higher security levels of inmates in the system. These higher security inmates did not qualify for the relatively lower security environment that exists in the laundry facility. A number of corrective action steps were taken in this regard, including the reevaluation of inmate worker criteria, the creation of an updated inmate worker qualification matrix, as well as the installation of an electronic monitoring system which tracks inmate movement throughout the laundry facility. As a result of these corrective measures, higher security level inmates are now allowed to work at the laundry, and the short-term shortage of clothing items has not been repeated.

During the March and April 2004 survey, it was reported that MCJ was not in compliance with the requirement to provide clothing exchange twice per week. In response to this concern, an audit was conducted at MCJ on August 5, 2004, by members of our Custody Support Services staff. The audit consisted of a physical check regarding the issues raised in the Department of Health Services' report. It was discovered that MCJ was issuing clothing to all inmates on a continuing basis. During the process, all inmates were receiving two sets of clothing, once per week. Additionally, MCJ was delivering another two sets of clothing to inmates at least 60 percent of the time, a second time during the week, which exceeds both MRSA and Title 15 requirements. In order to more fully comply with the specific requirements set forth by the Department of Health Services of two complete clothing exchanges per week, MCJ has since split their deliveries to one set of clothing, twice per week.

During the March and April 2004 LABS surveys, it was reported that TTCF was not in compliance with providing a complete exchange of clothing twice per week. It was determined that the previously discussed problems with the Pitchess Detention Center

Laundry had been the primary factor leading to the temporary reduction in the amount of clothing that had been available. As noted above, this issue has since been resolved. Logistics personnel assigned to TTCF monitor their laundry supply on a daily basis to ensure continuing compliance with the clothing exchange requirements. Any discrepancies/shortages of clean laundry are immediately brought to the attention of the facility captain.

University of California, Los Angeles - Graduate Study

Graduate students attending the University of California, Los Angeles, conducted a study on MRSA within the Los Angeles County Jail system. This statistical survey consisted of addressing three areas of concern based on data collected between August 2001 through July 2003. It is important to note that this date range includes pre-treatment and post-treatment data and that a more in-depth review should be conducted based on post-treatment data. However, the numbers provided show that a significant amount of inmates come into the jail system with MRSA. Currently, it is not known whether MRSA is being created within the jail environment, or if it is coming into the system via newly arriving inmates. Through a mathematical presentation and subsequent meetings with the UCLA Professor, the following three significant questions were addressed:

- *What is the rate of increase of the MRSA outbreak?*

"Monthly growth rate is 5 percent for males and 10 percent for female inmates."

- *How many new MRSA infections are occurring in the Jail per month?*

"The median infections per month are 77 for males and 21 for females."

- *How much does transmission outside the jail contribute to the number of new infections?*

"The median percentage of infections due to transmission outside the jail are 32 percent for males and 40 percent for females."

Current Trends in MRSA

On August 25, 2004, the Sheriff's Department and the Department of Health Services met to discuss monthly MRSA statistics and issues. The Department of Health Services reviews the cause of MRSA, either via transmission in the community or transmission in the jails. Inmates who are infected with MRSA with less than five days in custody are considered to be infected via the community and those with more than five days in custody are considered to be infected via infected inmates in the jails. As of the month of July 2004, there are a lower number of MRSA cases with more than five

days in custody and higher number of MRSA inmates with less than five days in custody. This preliminary information shows that the current trend of MRSA infection is brought in from the outside; however, additional studies will need to be conducted to confirm this information.

The Sheriff's Department is continually working toward increasing the awareness of MRSA throughout the jails for both staff and inmates. The Sheriff's Department has made considerable progress regarding this problem, and will continue to actively work with the Department of Health Services and other agencies in an attempt to combat MRSA nationwide. We appreciate the opportunity to discuss these issues with the Board of Supervisors and to give a detailed report of our progress with MRSA. We hope this letter addresses your concerns and demonstrates the Sheriff's Department's continuing commitment in combating MRSA. If you have any additional questions or concerns, please feel free to contact Chief Charles M. Jackson, of Correctional Services Division, at (213) 893-5017.

Sincerely,


LEROY D. BACA
SHERIFF

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #1

SURVEILLANCE – Medical Intake Screening

RECOMMENDATION #2

SURVEILLANCE – Daily Logs of Skin Infection

MSB	Refer to IRC.		Recommendation still in effect - A daily log documenting all skin infections, which lists inmate's name, booking number, and housing location is maintained in the facility clinic.
IRC	Recommendation still in effect – A specific question, directly related to skin cuts / boils / sores / wounds has been added to the medical screening process for all inmates at IRC.		Refer to MSB.
MCJ	Refer to IRC.		Refer to MSB.
TTCF	Refer to IRC.		Refer to MSB.
CRDF	Refer to IRC.		Refer to MSB.
NCCF	Refer to IRC.		Refer to MSB.
PDC-EAST	Refer to IRC.		Refer to MSB.
PDC-NORTH	Refer to IRC.		Refer to MSB.
MIRA LOMA	Federal detainees housed at this facility. Federal detention standards followed.		Refer to MSB.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #3

SURVEILLANCE – Culture all Skin Infections

RECOMMENDATION #4

SURVEILLANCE – Evaluate All Cell Mates

MSB	Recommendation still in effect - All skin infections are cultured upon initial clinic examination. YTD 5217 cultures taken with 1437 returning positive for MRSA.		Recommendation still in effect – Evaluation of cell mates having contact with infected MRSA patient is still in place.
IRC	Skin infections are cultured upon initial intake and screening, as necessary.		Refer to MSB.
MCJ	Refer to MSB.		Refer to MSB.
TTCF	Refer to MSB.		Refer to MSB.
CRDF	Refer to MSB.		Refer to MSB.
NCCF	Refer to MSB.		Refer to MSB.
PDC-EAST	Refer to MSB.		Refer to MSB.
PDC-NORTH	Refer to MSB.		Refer to MSB.
MIRA LOMA	Federal detainees housed at this facility. Federal detention standards followed.		Refer to MSB.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #5

SURVEILLANCE – ID Medical Charts of MRSA
Infected Inmates

RECOMMENDATION #6

QUALITY ASSURANCE – Random Chart
Review

MSB	Recommendation has been fully implemented – All medical charts are in JHIS; a consistent diagnosis of specific MRSA infections are being conducted by medical personnel.		Recommendation still in effect – Although DHS recommended a random review, we review all medical records of MRSA patients to ensure appropriate treatment.
IRC	Refer to MSB.		Refer to MSB.
MCJ	Refer to MSB.		Refer to MSB.
TTCF	Refer to MSB.		Refer to MSB.
CRDF	Refer to MSB.		Refer to MSB.
NCCF	Refer to MSB.		Refer to MSB.
PDC-EAST	Refer to MSB.		Refer to MSB.
PDC-NORTH	Refer to MSB.		Refer to MSB.
MIRA LOMA	Federal detainees housed at this facility. Federal detention standards followed.		Federal detainees housed at this facility. Federal detention standards followed.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES
CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #7

WOUND CARE AND TREATMENT – Dressing Changes

RECOMMENDATION #8

WOUND CARE AND TREATMENT – Bandage Disposal Protocol

MSB	Recommendation still in effect – Dressing change completed daily, and as needed, for any admitted inmates.		Recommendation still in effect – Bandage disposal protocols are in place.
IRC	Recommendation still in effect – Dressing change completed by medical personnel if inmates arrive with wound.		Refer to MSB.
MCJ	Recommendation still in effect – Dressing changes completed by medical personnel daily.		Refer to MSB.
TTOF	Refer to MCJ.		Refer to MSB.
CRDF	Refer to MCJ.		Refer to MSB.
NCCF	Refer to MCJ.		Refer to MSB.
PDC-EAST	Refer to MCJ.		Refer to MSB.
PDC-NORTH	Refer to MCJ.		Refer to MSB.
MIRA LOMA	Federal detainees housed at this facility. Federal detention standards followed.		Federal detainees housed at this facility. Federal detention standards followed.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #9

WOUND CARE AND TREATMENT – Ensure Proper Treatment Protocol

RECOMMENDATION #10

PREVENTION OF MRSA TRANSMISSION – Educate Inmates about Prevention/Transmission

MSB	Recommendation still in effect – LASD Doctors have been briefed by DHS and LASD Chief Physician regarding correct antibiotic treatment protocol. Compliance is reviewed through Q/A.		Recommendation still in effect – Informational / educational video shown to all newly incoming inmates at IRC, and shown at housing facilities. Fliers and posters have been distributed.
IRC	Refer to MSB.		Refer to MSB.
MCJ	Refer to MSB.		Refer to MSB.
TTCF	Refer to MSB.		Refer to MSB.
CRDF	Refer to MSB.		Refer to MSB.
NCCF	Refer to MSB.		Refer to MSB.
PDC-EAST	Refer to MSB.		Refer to MSB.
PDC-NORTH	Refer to MSB.		Refer to MSB.
MIRA LOMA	Federal detainees housed at this facility. Federal detention standards followed.		Recommendation still in effect - Video shown in all housing areas.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #11 PREVENTION OF MRSA TRANSMISSION – Personal Hygiene

RECOMMENDATION #12 PREVENTION OF MRSA TRANSMISSION – Environmental Cleaning

MSB	Recommendation still in effect - Inmates showered on a daily basis.		Recommendation has been fully implemented – Custody Division Policy requires cells/area to be cleaned after MRSA is suspected.
IRC	All incoming inmates showered upon entry and processing. Soap is provided.		Refer to MSB.
MCJ	Recommendation still in effect - Showers available 16-20 hours daily. Soap is available; personnel have been briefed on the importance of providing soap to inmates.		Refer to MSB.
TTCF	Refer to MCJ.		Refer to MSB.
CRDF	Refer to MCJ.		Refer to MSB.
NCCF	Refer to MCJ.		Refer to MSB.
PDC-EAST	Refer to MCJ.		Refer to MSB.
PDC-NORTH	Refer to MCJ.		Refer to MSB.
MIRA LOMA	Refer to MCJ.		Refer to MSB.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #13 PREVENTION OF MRSA TRANSMISSION – Laundry Exchange

RECOMMENDATION #14 PREVENTION OF MRSA TRANSMISSION – Laundry Processing

MSB	Recommendation still in effect – Inmates diagnosed with MRSA are showered and linen/clothing is exchanged.		Refer to PDC-NORTH.
IRC	Refer to MSB.		Refer to PDC-NORTH.
MCJ	Refer to MSB.		Refer to PDC-NORTH.
TTCF	Refer to MSB.		Refer to PDC-NORTH.
CRDF	Refer to MSB.		Refer to PDC-NORTH.
NCCF	Refer to MSB.		Refer to PDC-NORTH.
PDC-EAST	Refer to MSB.		Refer to PDC-NORTH.
PDC-NORTH	Refer to MSB.		Recommendation still in effect – PDC-North Facility still manages all laundry operations for the Department. Laundry is washed and dried at temperatures sufficient to kill MRSA. Exploring the possibility of adding an additional shift.
MIRA LOMA	Refer to MSB.		Refer to PDC-NORTH.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #15 PREVENTION OF MRSA TRANSMISSION – Laundry Processing

RECOMMENDATION #16 PREVENTION OF MRSA TRANSMISSION – Increase Frequency of Exchanges

MSB	Refer to PDC-NORTH.		Recommendation still in effect - Clothing and linen exchanged every other day and upon request by medical personnel.
IRC	Refer to PDC-NORTH.		Recommendation still in effect - All incoming inmates are issued clean clothing.
MCJ	Refer to PDC-NORTH.		Recommendation has been fully implemented – Linen / Uniform / Underwear exchanged twice weekly. Previously two sets issued once per week minimum.
TTCF	Refer to PDC-NORTH.		Recommendation still in effect –Linen / Uniforms / Underwear exchanged twice weekly.
CRDF	Refer to PDC-NORTH.		Refer to TTCF.
NCCF	Refer to PDC-NORTH.		Recommendation not in effect - Linen/Uniform/Underwear exchanged once per week. NCCF is working to correct this and will be doubling the number of clothing issued twice per week.
PDC-EAST	Refer to PDC-NORTH.		Recommendation in progress – Linen / Uniforms / Underwear exchanged once weekly, with two sets of clothing and underwear exchanged. PDC-East working on distributing twice weekly.
PDC-NORTH	Recommendation still in effect – Laundry dried thoroughly before re-issue to housing facilities; still in compliance.		Refer to TTCF.
MIRA LOMA	Refer to PDC-NORTH.		Recommendation still in effect - Uniforms – three per week; underwear – 5 sets per week; Linen 1 set per week. Federal standards in place at this facility.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #17 PREVENTION OF MRSA TRANSMISSION – Limit Transfers of Infected Inmates

RECOMMENDATION #18 PREVENTION OF MRSA TRANSMISSION – Medical Summary and Treatment Plan

MSB	Recommendations still in effect – Medical wristband identification procedure in place to prevent the random movement of acute/chronic type inmates.		Recommendation has been fully implemented – JHIS provides medical summaries for all inmates.
IRC	Refer to MSB.		Refer to MSB.
MCJ	Refer to MSB.		Refer to MSB.
TTCF	Refer to MSB.		Refer to MSB.
CRDF	Refer to MSB.		Refer to MSB.
NCCF	Refer to MSB.		Refer to MSB.
PDC-EAST	Refer to MSB.		Refer to MSB.
PDC-NORTH	Refer to MSB.		Refer to MSB.
MIRA LOMA	Federal detainees housed at this facility. Federal detention standards followed.		Federal detainees housed at this facility. Federal detention standards followed.

M.R.S.A. RECOMMENDATIONS BY DEPARTMENT OF HEALTH SERVICES

CURRENT STATUS OF COMPLIANCE – AUGUST, 2004

FACILITIES

RECOMMENDATION #19

PREVENTION OF MRSA TRANSMISSION –
Identify MRSA within Inmate's Medical Record

RECOMMENDATION #20

PREVENTION OF MRSA TRANSMISSION –
Staff Education and Protection

MSB	Recommendation partially completed - System capabilities have now been installed, practice and protocols for medical personnel are being reviewed and implemented.		Recommendation still in effect – Training videos and bulletins for staff are currently being utilized. MRSA prevention techniques are still discussed at facility briefings.
IRC	Refer to MSB.		Refer to MSB.
MCJ	Refer to MSB.		Refer to MSB.
TTCF	Refer to MSB.		Refer to MSB.
CRDF	Refer to MSB.		Refer to MSB.
NCCF	Refer to MSB.		Refer to MSB.
PDC-EAST	Refer to MSB.		Refer to MSB.
PDC-NORTH	Refer to MSB.		Refer to MSB.
MIRA LOMA	Refer to MSB.		Refer to MSB.